DEPARTMENT OF HEALTH AND HUMAN SERVICES HEALTH CARE FINANCING ADMINISTRATION		FORM APPROVED OMB NO. 0928-0193
TRANSMITTAL AND NOTICE OF APPROVAL OF	1. TRANSMITTAL NUMBER:	2. STATE
STATE PLAN MATERIAL	04.010	Name
	04-010 3. PROGRAM IDENTIFICATION: TI	Nevada
FOR: HEALTH CARE FINANCING ADMINISTRATION	SOCIAL SECURITY ACT (MEDIC	
TO: REGIONAL ADMINISTRATOR	4. PROPOSED EFFECTIVE DATE	
HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES	July 1, 2004	
5. TYPE OF PLAN MATERIAL (Check One):	July 1, 2004	
		_
	CONSIDERED AS NEW PLAN	
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AME		h amendment)
6. FEDERAL STATUTE/REGULATION CITATION:	7. FEDERAL BUDGET IMPACT: a. FFY 04	\$ 620,532.11
1902(a)(10)(A)(ii)(xv)	b. FFY 05	\$ 2,482,128.42
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:	9. PAGE NUMBER OF THE SUPERS	
	OR ATTACHMENT (If Applicable)):
Attachment 2.2a, Page 23d Attachment 2.6a, Pages 12d, 12e, 12f, 12g, 12n, 12o, Supplement 8a page and Supplement 8b page 3	1b	
10. SUBJECT OF AMENDMENT:		
Adoption of Basic Coverage Group under the Ticket To Work and Work	Incentives Improvement Act of 1999.	
11. GOVERNOR'S REVIEW (Check One): GOVERNOR'S OFFICE REPORTED NO COMMENT COMMENTS OF GOVERNOR'S OFFICE ENCLOSED NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	OTHER, AS SPEC The Governor's Of wish to review the	
12. SIGNATURE OF STATE APPRICY OFFICIAL:	16. RETURN TO: John A. Liveratti, Chief	
13. TYPED NAME:	DHCFP/Medicaid 1100 East William Street, Suite 102	
Michael J. Willden	Carson City, Nevada 89701	
14. TITLE:		
Director, DHR 15. DATE SUBMITTED: JUN 2 4 2004	-	
JUN 2 7 2007		
FOR REGIONAL OF		
17. DATE RECEIVED: June 24, 2004	18. DATE APPROVED: Septem	nber 22, 2004
PLAN APPROVED - ON	The state of the s	
19. EFFECTIVE DATE OF APPROVED MATERIAL: July 1, 2004	20, SIGNATURE OF REGIONAL OF	
21. TYPED NAME: Linda Minamoto	22 TITLE Associated Regional Division of Medicaid & Chil	Administrator
23. REMARKS: Block 8: Pen and ink change to add page numbers aggreed to by the State on September 13, 2004.	for Supplement 8a and Suppl	ement 8b as

State <u>Nevada</u>			Attachment 2.2a Page 23d
В.	Optional Groups Othe	r Thai	n the Medically Needy
1902(a)(10)(A) (ii)(XIII)of the Act		23.	BBA Work Incentives Eligibility Group – Individuals with a disability whose net family income is below 250 percent of the Federal poverty level for a family of the size involved and who, except for earned income, meet all criteria for receiving benefits under the SSI program. See page 12c of Attachment 2.6-A.
1902(a)(10)(A) (ii)(XV) of the Act		24.	TWWIIA Basic Coverage Group – Individuals with a disability at least 16 but less than 65 years of age whose income and resources do not exceed a standard established by the state. See page 12d of Attachment 2.6-A.
1902(a)(10)(A) (ii)(XVI) of the Act		25.	TWWIIA Medical Improvement Group - Employed individuals at least 16 but less than 65 years of age with a medically improved disability whose income and resources do not exceed a standard established by the State. See page 12h of Attachment 2.16-A.
			NOTE: If the State elects to cover this group, it MUST also cover the Basic Coverage Group described in no. 24 above.
TN# <u>04-010</u> Supersedes TN# <u>N/A</u>	Approval Date	SE	EP 2 2 2004 Effective Date _07/01/04

State Nevada			Attachment 2.6a Page 12d
1902(a)(10)(A) (ii)(XV) of the Act	(ii)	Group In dete with di and me	remining financial eligibility for working individuals sabilities under this provision, the following standards thodologies are applied: The agency does not apply any income or resource standard. NOTE: If the above option is chosen, no further eligibility-related options should be elected. The agency applies the following income and/or resource standard(s): gency applies the following income and or resource d(s): The maximum Gross Unearned Income standard is \$599.00. The maximum Net Income standard is 250% of the Federal Poverty Level (FPL). The resource standard is \$15,000.00 in nonexcluded resources.
TN# <u>04-010</u> Supersedes	Approval Date	SEP 22	2034 Effective Date <u>07/01/04</u>

TN# <u>N/A</u>

State Nevada		Attachment 2.6 Page 12
1902(a)(10)(A) (ii)(XV) of the Act (cont.)	Income	e Methodologies
(-)() ()	income	termining whether an individual meets the estandard described above, the agency uses the ing methodologies.
		The income methodologies of the SS program.
		The agency uses methodologies for treatment of income that are more restrictive than the SSI program. These more restrictive methodologies are described in Supplement 4 to Attachment 2.6-A.
	X	The agency uses more liberal income methodologies than the SSI program. More liberal income methodologies are described in Supplement 8a to Attachment 2.6-A.
TN#04-010	SEP 2 2 2001	

Supersedes TN# N/A

Approval Date _____

State Nevada	Attachment 2.6a Page 12f
1902(a)(10)(A) (ii)(XV) of the Act (cont.)	Resource Methodologies In determining whether the individual meets the resource standard described above, the agency uses the following methodologies.
	Unless one of the following items is checked the agency, under the authority of section 1902(r)(2) of the Act, disregards all funds held in retirement funds and accounts, including private retirement accounts such IRAs and other individual accounts, and employer-sponsored retirement plans such as 401(k) plans, Keogh plans, and employer pension plans. Any disregard involving retirement accounts is separately described in Supplement 8b to Attachment 2.6-A.
	The agency disregards funds held in employer-sponsored retirement plans, but not private retirement plans.
	The agency disregards funds in retirement accounts in a manner other than those described above. The agency's disregards are specified in Supplement 8b to Attachment 2.6-A.
TN# 04-010 Supersedes Approval Date S	EP 2 2 2001 Effective Date 07/01/04

Supersedes TN# N/A

State <u>Nevada</u>			Attachment 2.6a Page 12g
1902(a)(10)(A) (ii)(XV) of the Act (cont.)			The agency does not disregard funds in retirement accounts.
		X	The agency uses resource methodologies in addition to any indicated above that are more liberal than those used by the SSI program. More liberal resource methodologies are described in Supplement 8b to Attachment 2.6A
			The agency uses the resource methodologies of the SSI program.
			The agency uses methodologies for treatment of resources that are more restrictive than the SSI program. These more restrictive methodologies are described in Supplement 5 to Attachment 2.6-A.
TN# _ 04-010 Supersedes TN# _ N/A	Approval Date	SED O A	Effective Date <u>07/01/04</u>

State Nevada	Attachment 2.6a Page 12n
1902(a)(10)(A)(ii)(XIII), (XV), (XVI), and 1916(g) of the Act (cont.)	For individuals eligible under the Basic Coverage Group described in No. 2y on page 23d of Attachment 2.2-A:
	NOTE: Regardless of the option selected below, the agency MUST require that individuals whose annual adjusted gross income, as defined under IRS statute, exceeds \$75,000 pay 100 percent of premiums.
	X The agency requires individuals to pay premiums or other cost-sharing charges on a sliding scale based on income below 450 percent of the Federal poverty level for a family of the size involved, the amount of premiums cannot exceed 7.5 percent of the individual's income.
	The premiums or other cost-sharing charges, and how they are applied, are described on page 12o.

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Approval Date SEP 2 2 2004

State Nevada

Attachment 2.6a Page 12o

Sections 1902(a)(10)(A) (ii)(XV), (XVI), and 1916(g) of the Act (cont.)

Premiums and Other Cost-Sharing Charges

For the Basic Coverage Group and the Medical Improvement Group, the agency's premium or other cost-sharing charges, and how they are applied, are described below.

Payment of a premium applies to an individual who has Combined Net Income greater than 0% FPL but less than or equal to 250% FPL. The premium calculation is determined as follows:

- 1. An individual with Combined Net Income of greater than 0% FPL and less than 200% FPL pays a premium of 5% of the individual's Combined Net Income.
- 2. An individual with Combined net Income between 200% FPL and 250% FPL pays a premium of 7.5% of the individual's Combined Net Income.
- 3. No other cost sharing charges apply.

TN# <u>04-010</u> Supersedes TN# <u>N/A</u>

Approval Date SEP 2 2 2004

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State Nevada	Supplement 8a to Attachment 2.6a
	Page 1b

The State follows the SSI rules. The agency uses income methodologies of the SSI program as well as more liberal income deduction methodologies than the SSI Program. Any amounts indicated in the Medicaid Assistance to the Aged, Blind and Disabled Manual will not be applied.

The following are the more liberal income methodology deductions allowed by the agency:

- 1. Educational Expenses to Enhance Employability
- 2. Employment Related Interpreting Services Expenses

TN# <u>04-010</u> Supersedes TN# <u>N/A</u>

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Supplement 8b to Attachment 2.6a

Page 3

The agency use by SSI.	s more liberal methods for the treatment of resources under S	Section 1902(r)(2) of the Act than is u
The following a	re the more liberal methods for the treatment of resources:	
1. 2. 3. 4. 5. 6. 7.	Approved Accounts of \$15,000.00 or less Special needs trusts IRS recognized retirement accounts SSA death benefit payments Medical savings accounts Tax refunds Life insurance policies with cash surrender values of less t Funeral/burial policies	han \$50,000.00
TN# 04-010 Supersedes	Approval Date SEP 2 2 2004	Effective Date07/01/04